Strategies for a Smoke-free World

Recommendations of the International Workshop on Smoking and Health to the International Council on Alcohol and Addictions

Calgary, Alberta, Canada, 1985

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Organized by
The Health Promotion Directorate, Health and Welfare Canada
and
The Alberta Alcohol and Drug Abuse Commission

In cooperation with
The World Health Organization Program on Smoking and Health

At the request of
The International Council on Alcohol and Addictions
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The opinions expressed in this document do not necessarily reflect the policies of the organizations involved in conducting the workshop.

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Revision 2

Introduction

In 1980 the Board of Directors of the International Council on Alcohol and Addictions (ICAA) concluded that tobacco, because of its highly addictive properties, should be included within the Council's mandate. However, the ICAA was able to devote few resources to tobacco issues prior to the 34th International Congress on Alcoholism and Drug Dependence,[1] held in Calgary, Canada, in August 1985. The 34th Congress provided the opportunity to initiate a more active program.

With this in mind, a four day International Workshop on Smoking and Health was convened immediately prior to the 34th Congress. It was organized at the request of the ICAA by the Health Promotion Directorate of Health and Welfare Canada and the Alberta Alcohol and Drug Abuse Commission, in cooperation with the World Health Organization Program on Smoking and Health. Recognized experts from around the world were invited to participate in the Workshop (See *Participants in the Workshop*).

The Workshop took the approach that tobacco is as addictive as any of the other substances with which the ICAA is concerned. The addictive properties of tobacco cause people to continue smoking, even when they recognize the health consequences and would like to stop. This point, which has been underemphasized in the past, has both policy and program implications. In policy terms, it raises the ethical question of whether or not governments should allow multinational conglomerates to seek new markets for tobacco products. In program terms, it highlights the critical importance of prevention and the likely difficulty of cessation. Nevertheless, the Workshop considered it important to emphasize that millions of people can and do quit smoking, most of them on their own. Unfortunately, many more do not.

Tobacco's addictive properties legitimize the involvement of the ICAA with tobacco issues. Moreover, these properties lend further urgency to the need for intervention by specialized addiction agencies. Since few people smoke in moderation, there are inevitable and usually serious health consequences for virtually all users. Non-users exposed to tobacco smoke are also at risk.

This document contains the Recommendations of the International Workshop on Smoking and Health to the ICAA Board of Directors. In addition, a general report of the Workshop discussions and a collection of selected resource papers prepared specifically for the workshop are separately available (See *Related Documents*).

Recommendations To ICAA

Participants in the International Workshop on Smoking and Health welcome the decision by the ICAA to become actively involved in tobacco control. The ICAA, with its addiction perspective and impressive network of contacts, offers a significant opportunity to strengthen international efforts.

The fourteen recommendations that follow involve a significant new role for the ICAA in the tobacco field. Some can be initiated immediately; others suggest policy guidelines for future action. Four involve policy, seven concern strategy and three deal with research. Several state positions that the ICAA is asked to advocate in its relations with other bodies.

Policy Recommendations

1. The Workshop asks the ICAA to endorse the objectives and recommendations set out in the World Health Organization 1979 Expert Committee report *Controlling the Smoking Epidemic*,[2] which calls for, among other things, an end to all forms of tobacco promotion.

2. The ICAA is also asked to join the International Union Against Tuberculosis and l'Union Internationale Contre le Cancer in endorsing the recommendations of the World Health Organization 1983 Expert Committee report *Smoking Control in Developing Countries*.[3]

3. The ICAA should actively campaign for the adoption of comprehensive tobacco control programs, both nationally and internationally. In making this recommendation, the Workshop stresses the need to adopt a strong advocacy position for concerted political action.

4. It is recommended that the ICAA convene an advisory group to prepare a program of work that will concentrate its efforts in tobacco control. This group could build on this report[4] and design a plan of action that suits the capacity and network of the ICAA. The ICAA is also asked to widely publicize its involvement in the tobacco field.

Strategy Recommendations

5. The ICAA strategy should recognize the accomplishments of those already active in the field, and use its international position to strengthen their voice. To this end, the ICAA is asked to seek membership in the International Liaison Group on Smoking and Health.

6. The ICAA is asked to urge the World Health Organization to convene a summit meeting of non-governmental organizations concerned with tobacco control. This will provide an opportunity to further integrate anti-smoking efforts and to enlist the support of new allies such as international youth groups and amateur sport federations.

7. The ICAA is asked to urge the World Health Organization to match its commitment of resources to smoking and health with its expression of concern about the issue. This involves strengthening the headquarters program in Geneva, and establishing or expanding focal points in regional offices, especially those dealing with developing countries.

8. It is recommended that the ICAA urge other members of the United Nations family of organizations to adopt policies that will actively combat the cultivation and use of tobacco. Under no circumstances should organizations such as the Food and Agricultural Organization, the United Nations Conference on Trade and Development, or the World Bank assist any country to grow tobacco. Instead, they should encourage crop diversification and take steps to raise the awareness of Third World governments of the environmental and economic consequences of tobacco production. If we are to achieve "health for all", especially in the developing world, international institutions must use their consulting, economic and fiscal power to foster crop substitution, and introduce economic development that reduces the reliance on tobacco growing.

9. The ICAA should seek support from international and national aid agencies to encourage the development of training programs for coordinators in tobacco control. Establishment of focal points with well-trained staff is an essential starting point for developing countries.

10. It is recommended that the ICAA take a determined position on tobacco control and urge governments, other addiction agencies, and its own members to recognize that in establishing priorities, the consequences associated with tobacco use are at least comparable in their severity to alcohol and other drugs.

11. The Workshop recommends that the ICAA urge governments around the world to spend the equivalent of one percent of their tax revenue from tobacco on tobacco/health education. If necessary, tobacco taxes should be increased to cover this. Furthermore, the Workshop urges that each country allocate a portion of its tobacco tax revenue to an international fund that would support similar activities at the international level.

Research Recommendations

12. The Workshop recommends the assessment of alternative, economically-viable tobacco substitutes in countries with variable climatic and socio-economic conditions.

13. The Workshop recommends that a comprehensive cost-benefit review of the issues in tobacco production and use be undertaken. The short-term gains associated with tobacco growing makes it understandable that countries needing jobs, tax revenue and foreign exchange turn to tobacco as a cash crop. However, these decisions ignore the long-term health, economic and environmental consequences. These need to be brought to the fore in a comprehensive study.

14. A program of targeted research is proposed. Such a program would involve the identification and characterization of addiction mechanisms, development of better measures of exposure to the constituents of tobacco and examination of the industry's strategies for expansion into new markets. These are practical and important avenues of exploration.

Conclusion

The Workshop accepts the epidemic consequences of tobacco use as an incontrovertable fact challenging world health. It recognizes that successful strategies exist — if the political will to put them in place can be asserted. The Workshop urges all countries of the world to actualize that will by initiating comprehensive programs in tobacco control.

The entrance of the ICAA to the field is a positive development. We look forward to the contribution that an experienced addiction agency can bring to the traditional strategic planning in tobacco control. We extend our appreciation for your support and offer these recommendations to the Board of Directors of the ICAA as you join the international challenge of tobacco control.

Footnotes

[1]The International Council on Alcohol and Addictions is an international non-governmental organization with consultative status (Category II) with the United Nations Economic and Social Council, and is in official relations with the World Health Organization. Among its functions is the sponsorship of the International Congresses on Alcoholism and Drug Dependence. The 34th Congress was held in Calgary, Canada in August, 1985. This Congress marked the 100th anniversary of these events.

[2]World Health Organization, *Controlling the Smoking Epidemic. Report of a WHO Expert Committee*, Technical Report Series No. 636 (Geneva: 1979).

[3]World Health Organization, *Smoking Control Strategies in Developing Countries. Report of a WHO Expert Committee*, Technical Report Series No. 695 (Geneva: 1983).

[4]Alberta Alcohol and Drug Abuse Commission, *Strategies for a Smoke-free World. A Report of the International Workshop on Smoking and Health* (Edmonton: 1986).

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Related Documents

1. Alberta Alcohol and Drug Abuse Commission, *Strategies for a Smoke-free World, A Report of the International Workshop on Smoking and Health* (Edmonton: 1986).

2. Alberta Alcohol and Drug Abuse Commission, *Strategies for a Smoke-free World, Selected Resource Documents* (Edmonton: Available August, 1986).

Both of these documents are available at a nominal charge from:

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Box 140, CH-1001
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